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RULE				

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** CONTINUING DATA *****

This application is a DIV of 09/848,742 05/03/2001 PAT 6,881,209
which claims benefit of 60/207,058 05/25/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/20/2005

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 5	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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TITLE

MEDICAL DEVICE INCLUDING UNITARY, CONTINUOUS PORTION OF VARYING DUROMETER

FILING FEE RECEIVED 4068	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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